Form 8872
(November 2002)
Department of the Treasury
Internal Revenue Service

Political Organization Report of Contributions and Expenditures

OMB No 1545-1696

THE ITEM	INEVERIDE DELVICE		ee oet	parate instructions.					
Α	For the period beginning	JANUARY 1		, 20 13 and	ending	JL	INE 30	, 20	13
В	Check applicable boxes	Initial report		Change of address	Ar	nended repo	rt [Final report	
1	Name of organization							ion number	
2	INDIANA STATE BUILDING				-	45-0730218	<u> </u>		
2	Mailing address (PO Box or 150 W. MARKET STREET, S		oom or	suite number)					
·····	City or town, state, and ZIP c					·			
	INDIANAPOLIS, IN 46204	000							
3	E-mail address of organization	ก				4 Date org	anization	was formed	
	pwa1818159@aol com							/2012	
5 a	Name of custodian of records	;	5 b	Custodian's address				<u> </u>	
				150 W MARKET ST	REET, S	JIOTE 805			
	PETER RIMSANS		 	INDIANAPOLIS, IN 4					
6 a	6 a Name of contact person		6 b Contact person's address						
				150 W MARKET ST	REE1, S	UITE 805	· · - · · · · · · · · · · · · · · · · ·		
	PETER RIMSANS		ł	INDIANAPOLIS, IN 4	16204				
7	Business address of organiza	ation (if different from	mailing			er street ar	nd room o	r suite numbe	
		(,	·, ···	, o., o., o., a.		. outto mamb	٠.
	City or town, state, and ZIP c	ode							
	**·	, ,		· · · · · · · · · · · · · · · · · · ·					
8	Type of report (check only on	e box)							
	m		f	Monthly report for					
а	First quarterly report (due	by April 15)		(due by the 20th o					ot
h	Second quarterly report (c	dua by luly 15)	_	the December rep					4:1
	Second quarterly report (c	ide by July 13)	g	Pre-election report (1) Type of electric		rine izin or	rotti day i	before trie ei	ection)
c	Third quarterly report (due	by October 15)		(2) Date of electi	*****				
•	a danterly topolit (and	2) 00.020. 10,		(3) For the state			-		
d	Year-end report (due by J	anuary 31)		(0)					
		• ,	h	Post-general electro	on report	due by the 30	Oth day afte	er general elec	ction)
e	X Mid-year report (Non-elec	tion		(1) Date of electi		•	•	•	,
	year only-due by July 31)			(2) For the state	of				
_	Trible and the second								
9	Total amount of reported conf	indutions (total from a	II attac	hed Schedules A)			9		10,948
10	Total amount of reported exp	enditures (total from a	ill attac	had Schadulas R)			10		6,812
	Under penalties of per				uding ac	companying		e and	0,012
٥:	1 - 4 - 4						Jon Caulo.	Juna	
Sign		<i>,</i> , ,		,	,		,	,	
Here	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u>-</u>			_ •	フ	/23/	2013	
	Signature of aut	horized official			_ 🏏	Date			
(HTA)	For Paperwork Red	uction Act Notice, see	separ	ate instructions.——	WE B	 -		Form 8872	(11-2002)
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F 8872 (11-2002)

chedule A Itemized Contributions lame of organization	Schedule A page 1 of 1 Employer identification number			
NDIANA STATE BUILDING & CONSTRUCTION TRAD	DES COUNCIL		30218	
Contributor's name, mailing address and ZIP code	Name of contributor's employer NA		Amount of contribution	
NDIANA STATE BLDG & CONST TRADES COUNCII	Contributor's occupation NA		\$. 10,94	
50 W MARKET STREET, SUITE 805	Aggregate contributions		Date of contribution	
NDIANAPOLIS, IN 46204	year-to-date . ▶ \$	10,948	5/10/2013	
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation		Amount of contributions	
	Contributor's occupation		\$	
	Aggregate contributions year-to-date \$	Date of contribution		
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions		
	Contributor's occupation		s	
	Aggregate contributions		Date of contribution	
	year-to-date ► \$			
contributor's name, mailing address and ZIP code	Name of contributor's employer		Amount of contributions	
	Contributor's occupation		s	
	Aggregate contributions year-to-date \$		Date of contribution	
contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions		
	Contributor's occupation		\$	
	Aggregate contributions		Date of contribution	
	year-to-date . ▶ \$			
contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions		
	Contributor's occupation		\$	
	Aggregate contributions		Date of contribution	
	year-to-date ▶ \$			
contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions		
	Contributor's occupation			
			\$	
	Aggregate contributions		Date of contribution	
Contributor's name, mailing address and ZIP code	year-to-date		Amount of contributions	
	Contributor's occupation			
i			\$	
	Aggregate contributions		Date of contribution	
ontributor's name, mailing address and ZIP code	year-to-date		Amount of contributions	
	Contributor's occupation			
	A = = = = = = = = = = = = = = = = = = =		\$	
	Aggregate contributions vear-to-date ▶ \$		Date of contribution	

		Schedule B page 1 of 1
Name of organization	Employer identification number	
INDIANA STATE BUILDING & CONSTRUCTION		45-0730218
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	NA	\$ 5,000
INDIANA DEMOCRAT PARTY	Recipient's occupation	Date of expenditure
INDIANA STATE BUILDING	NA	5,00,0040
INDIANAPOLIS, IN 46204 Purpose of expenditure	NA NA	5/23/2013
DONATION NA		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	NA NA	\$ 500
HOOSIERS FOR SCOTT PELATH	Recipient's occupation	Date of expenditure
1824 MANHATTAN ST		·
MICHIGAN CITY 46360	HOUSE OF REPRESENTATIVES	S MEMBER 5/31/2013
Purpose of expenditure DONATION		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
] _{NA}	\$ 1,312
AGGREGATE BELOW THRESHOLD 150 W MARKET ST	Recipient's occupation	Date of expenditure
INDIANAPOLIS, IN 46204	NA	
Purpose of expenditure DONATION		
Recipient's name, mailing address and ZIP code	Name of requirent's employer	TA mount of owner diture
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		s
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
Troopionto namo, maining adarese and Em essas	Traine of resipions on picyon	, who are of experience
		s
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		\$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Subtotal of expenditures reported on this page of	only Enter here and also include this	
amount in the total on line 10 of Form 8872		🕨 \$ 6,812